

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CA 0008 B 0290 B 1 1		Manifest Document No. 005187	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address REDONDO AUTO BODY SHOP 620 MARY ANN DRIVE REDONDO BEACH, CA 902708 ATTN: BODY SHOP MANAGER					A. State Manifest Document Number 86299936		
4. Generator's Phone (213) 376-7956					B. State Generator's ID		
5. Transporter 1 Company Name HAZCO INTERNATIONAL, INC.					C. State Transporter's ID 705215		
6. US EPA ID Number V A D B B B B B B B B D					D. Transporter's Phone 800-237-1333		
7. Transporter 2 Company Name					E. State Transporter's ID		
8. US EPA ID Number					F. Transporter's Phone		
9. Designated Facility Name and Site Address OMEGA RECOVERY SERVICE 12504 EAST WHITTIER BLVD. WHITTIER, CA 90602					G. State Facility's ID C A D 0 4 2 2 4 5 0 0 1		
10. US EPA ID Number C A D 0 4 2 2 4 5 0 0 1					H. Facility's Phone 213-698-0991		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)					12. Containers	13. Total Quantity	14. Unit Wt/Vol
a. WASTE PAINT RELATED MATERIAL, FLAMMABLE LIQUID, NA 1263					No.	Type	Waste No.
b.							
c.							
d.							
J. Additional Descriptions for Materials Listed Above					K. Handling Codes for Wastes Listed Above		
15. Special Handling Instructions and Additional Information GLOVES, GOGGLES & PROTECTIVE CLOTHING							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.							
Printed/Typed Name FEIPE ACOSTA					Signature Feipe Acosta		
17. Transporter 1 Acknowledgment of Receipt of Materials					Month Day Year 1 5 11 1987		
Printed/Typed Name Robert J CIRINGFONI					Signature Robert J Ciringfoni		
18. Transporter 2 Acknowledgment of Receipt of Materials					Month Day Year 1 5 11 1987		
Printed/Typed Name					Signature		
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name N. JAY Solomon					Signature N. Jay Solomon		
					Month Day Year 1 5 12 1987		

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